Complete if Known

10/780,740

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
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Application Number

FEE TRANSMITTAL

	for FY 2005 Effective 10/01/2004. Patent fees are subject to appual revision.		Filing Date		Dece	December 8, 2005		
~			First Named Inventor Ta			dashi Sasaki		
,4	Effective 10/01/2004. Patent fees are subject to annual revision.		Examiner Name W		Willia	am B. Perkey		
3 4	Applicant claims small entity status. See 37 CFR 1.27		Art Unit 28		2851			
ا ا	TAL AMOUNT OF PAYMENT (\$) 1700.00	Attorney Docket No.		et No.	87900-000518/US			
M	METHOD OF PAYMENT (check all that apply)					ALCULATION (continued)		
	☑ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order		3. ADDITIONAL FE Large Entity Sma			ES Il Entity		
	☑ Deposit Account:	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
	Deposit	1051	130	2051	65	Surcharge - late filing fee or oath		
	Account 08-0750 Number	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
[Deposit	1053 1812	130 2,520	1053 1812	130 2,520	Non-English specification For filing a request for reexamination		
	Account Harness, Dickey & Pierce, PLC Name	1804	920*	1804	920°	Requesting publication of SIR prior to Examiner action		
	The Director is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☑ Credit any overpayments	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
	☐ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee	1251	120	2251	60	Extension for reply within first month		
ļ	to the above-identified deposit account. FEE CALCULATION	1252	450	2252	225	Extension for reply within second month		
ŀ		1253 1254	1020 1,590	2253 2254	510 795	Extension for reply within third month		
	1. BASIC FILING FEE Large Entity Small Entity	1254	1,080	2204	, 33	Extension for reply within fourth month		
	Fee Fee Fee Fee Description	1255	2,160	2255	1080	Extension for reply within fifth month		
	Code (\$) Code (\$) Fee Paid	1401	500	2401	250	Notice of Appeal		
	1011 300 2011 150 Utility filing fee 1012 200 2012 100 Design filing fee	1402 1403	500 1000	2402 2403	250 500	Filing a brief in support of an appeal Request for oral hearing		
1	1012 200 2012 100 Design filing fee 1013 200 2013 100 Plant filing fee	1452	500	2452	250	Petition to revive – unavoidable	H	
	1014 300 2014 150 Reissue filing fee	1453	1500	2453	750	Petition to revive – unintentional		
	1005 200 2005 100 Provisional filling fee	1501	1400	2501	700	Utility issue fee (or reissue)	1400	
-		1502	800	2502	400	Design issue fee		
- 1	SUBTOTAL (1) (\$) 0	1460	130	1460	130	Petitions to the Commissioner		
ı	2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1807	50	1807	50 ,	Processing fee under 37 CFR 1.17 (q)	 	
	Extra Fee from Fee Claims below Paid	1806	180	1806	180	Submission of Information Disclosure Stmt Recording each patent assignment		
ŀ	Total Claims	8021	40	8021	40	per property (times number of properties)		
	Multiple	1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
	Dependent Large Entity Small Entity	1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
	Fee Fee Fee Fee Code (\$) Fee Description	1801	790	2801	395	Request for Continued Examination (RCE)	300	
	1202 50 2202 25 Claims in excess of 20	Other fee (specify) Publication Fee						
	· ·	200 200 100 Hultiple dependent plain if not poid						
	** Rejecue independent claims over					ON FEES		
	1204 200 2204 100 original patent	1111	500	2111	250	Utility Search Fee	\vdash	
	1205 50 2205 25 ** Reissue claims in excess of 20 and over original patent	1112 1113	100 300	2112 2113	50 150	Design Search Fee Plant Search Fee		
ļ	Over Original Paterix	1114	500		250	Reissue Search Fee		
ļ	SUBTOTAL (2) (\$) 0	1311	200	2311	100	Utility Examination Fee		
Į		1312	130	2312	65	Design Examination Fee		
1		1313	160		80	Plant Examination Fee		
	I	1314	600	2314	300	Reissue Examination Fee	┸┈┈┤	
L	**or number previously paid, if greater; For Reissues, see above	<u> </u>	SUBTOTAL (4) (\$)0					
f	SUBMITTED BY Registerion No.		Complete (if applicable)					
-	Name (Print/Type) JONN A. Castellano (Atonfey/Agent)		35,094 Telephone 703-668-8000					
(Signature Date December 8, 2005 WARNING: Information on this form may become public. Credit card information should not be							